A Center Policy & Practice Analysis Brief . . .

Youth Risk Taking Behavior: The Role of Schools

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Preface

Risk taking is natural. As the bumper stickers says: *Risk taking happens!*

Risk taking behavior may be beneficial or harmful.

Some risk taking is unintentional. But a considerable amount stems from proactive or reactive motivation.

For schools, some forms of student risk taking behavior are a necessity, and some forms are a problem. With respect to the former, it is clear that learning frequently is a risky business. That is, it is a given that successful instruction calls for students to take risks (e.g., to attempt hard tasks and risk making errors). It is also a given, however, that schools must contend with risk takers whose behavior may be harmful to themselves and/or others.

As schools try to address harmful risks taken by young people, many of the presumptions about risk taking that have dominated thinking must be set aside. For example, Byrnes (2003) and others indicate available evidence does not support the views that

>Adolescents take risks because they lack knowledge
>Adolescents take risks because they think they are invulnerable
>All forms of risk taking are bad
>Adolescents who take risks in one domain usually take risks in others as well
>Risk taking diminishes with age
>Males are always more likely to take risks than females
>Decision making can be improved simply by giving teenagers metacognitive insight into the nature of decision making

In place of such assumptions, schools need to reflect on several motivational questions. For example:

"What motivates risk taking?"
"What motivates people to override their natural protective mechanisms when they choose to take risks?"
"What motivates people not to engage in those risky behaviors that society has labeled illegal or extremely dangerous to one's health?"

More broadly, school decision makers must approach harmful risk taking behaviors, and all other factors that can be barriers to learning and teaching, in terms of the overall mission of the institution and ongoing efforts to improve schools. From this perspective, they need to consider the impact of the current trend to adopt problem-specific programs focused on students per se. They also need to analyze the role school policies and practices may be playing in stimulating such behaviors.

The analysis presented in this brief was designed to highlight these matters by viewing youth risk taking behavior in the context of school improvement efforts.

As with all of the Center policy and practice analysis briefs, the following includes an overview that draws on those who have focused extensively on the topic. At the same time, it should be stressed that we assume responsibility for any errors of omission or commission and for all conclusions.

Contents

Youth Risk Taking Behavior: The Role of Schools

Controversy surrounds any discussion of what motivates youth risk-taking and what to do about it. Indeed, controversy arises as soon as the term is used.

There is a tendency to apply the term primarily to a subgroup of self-initiated behaviors that society views as problems. From a developmental perspective, however, it is a reality that many facets of learning and development inherently are risky enterprises, with learning taking place even when an experience does not lead to "success." Thus, some risk taking clearly is appropriate and, indeed, essential to promoting learning and development.

Concerns arise when risk taking significantly endangers the person taking the risk and/or others. Even then, some potentially dangerous risk taking behavior is sanctioned widely by the society (e.g., contact sports, skate-boarding, taking prescription medication despite significant side effects, high stakes testing) or will be once the youngster is no longer a legal minor (e.g., enlisting in the armed forces, gambling, consuming alcoholic beverages, sexual intercourse, smoking). Thus, risk taking is perceived as necessary in some arenas (e.g., many learning situations), under some conditions (e.g., when safety precautions and protections are in place), and during some stages of life (e.g., post adolescence).

Harmful risk taking often is defined in terms of probable negative outcomes (e.g., How probable is it that pursuing a given behavior will lead to an unwanted outcome? severe consequences?). In this context, it is well to remember that the probabilities assigned by those taking risks often differ from those who are observing them, and in both instances, probabilities may be underestimated or overestimated.

> Porter and Lindberg's (2000) analysis of the 1995 National Longitudinal Survey of Adolescent Health found that 28% of all students in grades 7 through 12 participate in two or more of the ten health risk behaviors under study. These are referred to as "multiple risk students"

Controversy increases when the question arises: *Why do so many young people take risks that endanger themselves and/or others?* Some developmental theorists argue that, for the majority of young people, risk taking is a manifestation of natural exploration and movement toward greater autonomy; others see it as a reactive response when exploration and efforts toward greater independence are curtailed. From the viewpoint of motivational theories based on an expectancy x value paradigm, risk taking is judged with respect to the probabilities assigned to expected outcomes multiplied by the probable value to be gained.

Research on what motivates risk taking is inconclusive. However, it seems evident that some risk-taking is motivated by external circumstances, and some is motivated by factors intrinsic to the individual. Some risk taking is reactive; some is proactive. Relatedly, risk takers have been grouped into three categories: those who try to avoid risks, those who weigh outcomes to reduce risks, and those who seek out risks. The last group often is seen as made up of "sensation seekers" (e.g., seekers of thrills, adventures, dangerous experiences).

> The Annenberg Adolescent Risk Communication Institute (2003) conducted a survey of youth aged 14 to 22 assessing the extent to which young people differ in sensation seeking and involvement in prosocial activities. For sensation seeking, the report indicates that
>
> >70% of youngsters prefer friends who are exciting and unpredictable;
>
> >70% of youngsters like to explore strange places;
>
> >47% of youngsters like new and exciting experiences;
>
> >37% of youngsters like to do frightening things.

General categories, of course, ignore individual differences. In this context, questions have been raised about differences due to possible genetic predispositions; biological and psychological stages of development and capability; social pressures from peers, family, school, society; evaluations of incentives, costs, and consequences; intrinsic motivational needs; and more. (See Exhibit 1.)

As a final point in this brief introduction, it is important to keep in mind that, while motivation is a necessary condition, it is insufficient for explaining action. Actions require conditions that encompass opportunity and means.

Despite limitations related to fully understanding risk taking behavior, school policy makers and planners must arrive at decisions about

(1) what role schools should play in countering risk taking behaviors that society deems inappropriate for children and adolescents

and

(2) how to carry out that role in keeping with a school's overall mission.

We begin by highlighting first what schools currently are doing in this arena.

Exhibit 1

Deciding to Take a Risk?

Applying his self-regulation model of decision making to risk taking, James Byrnes (2003) suggests that in real-world contexts, "people's choices reflect

(a) their beliefs in how one is supposed to behave in these situations (moral and conventional beliefs),
(b) their values about what is important (including other people's opinions of you),
(c) their beliefs about the likely consequences of actions carried out in that context (includes their risk perception),
(d) their goals to pursue outcomes that elicit positive emotions and goals to avoid outcomes that elicit negative emotions),
(e) their current state of mind (including fatigue, emotional arousal, mood, intoxication),
(f) the degree to which they reflect on their options,
(g) strategies for modifying or compensating for unhelpful states of mind or temperamental traits (e.g., impulsivity),
(h) their working memory capacity – that is the processing space for entertaining the issues in (a) to (d) in consciousness."

All these factors are seen as conspiring together "in a probabilistic fashion to determine who will take a risk in a particular situation and who will not. Which ones are operative in a given situation depends on the amount of working memory a person has, his or her prior experience, and the cues present in the situation."

Another perspective is offered by Laurence Steinberg (2003). He states

> "Adolescents find themselves in situations that sometimes unfold in risky or dangerous ways, and they often fail to stop them from unfolding, either because they are not paying attention to what is happening, can't envision where the unfolding is leading, or are unable to extricate themselves from their circumstances. . . . an awful lot of risk taking during adolescence is the product not of deficient thinking but of immature judgment.
>
> . . . judgment refers to the complexity and sophistication of the process of individual decision making as it is affected by a range of cognitive, emotional, and social factors.
>
> . . . *judgment* better captures the mix of cognitive and psychosocial processes of interest than does decision making...."

What Schools Do with Respect to Risk Taking Behaviors

Educators clearly are concerned about the impact on schools of students risk taking behaviors. Some have tried to legislate major consequences to keep such behavior in check (e.g., zero tolerance for illicit drugs or weapons on campus). Widespread controversy surrounds such policies.

Besides punishment, most school districts have added risk taking interventions to the range of programs and services they offer to address school and student needs and problems. The interventions may be for all students in a school, for those in specified grades, and/or for those specifically identified.

School policy makers are particularly concerned with school safety and other health behaviors that limit progress in improving schools. As a result, they have been guided mostly by professionals in the health and juvenile justice fields.

In 2000, the Urban Institute published *Teen Risk-Taking: Promising Prevention Programs and Approaches* (Eisen, Pallitto, Bradner, & Bolshun, 2000). As the report notes:

> The most serious threats to the health and safety of adolescents and young adults are preventable. They result from such risk-taking behaviors as fighting, substance abuse, suicide, and sexual activity rather than from illness. Many teens do not engage in any of these behaviors; however, most teens that engage in any one of these behaviors are also likely to engage in others, thereby increasing the chance of damage to their health.
>
> Programs intended to educate preteens and teens by steering them away from such risky behavior are in demand and gaining in popularity. These programs often are based in schools, where they can potentially reach large and diverse groups of youth.

Much more is needed to bridge the gap that now exists between prevention research and practice in school . . . .
Eisen, Pallito, Bradner, & Bolshun, 2000

The report limits itself to a pool of 51 evidence-based problem behavior prevention programs addressing sexual behavior and reproductive health (N=25), substance use (N=17), violent behavior and conflict resolution (N=7), and mental health (N=2). Drawing from these, an analysis was made of 21 that had the best data. The document profiles all 51 programs and uses the analysis of the 21 to arrive at a picture of common elements of "success."

While schools are involved in other efforts to address risk taking behavior, the sample covered in the report provides a reasonable picture of the content areas and type of approaches that currently are in play. Exhibit 2 highlights what the study authors suggest are common elements of the promising programs.

Exhibit 2

Suggested Common Elements of Promising Programs

From: *Teen Risk-Taking: Promising Prevention Programs and Approaches*
by Eisen, Pallitto, Bradner, & Bolshun (2000) http://www.urban.org/publications/310293.html

The following are the authors conclusions about essential elements of promising programs based on analyses of overlapping features in 21 programs. These conclusions are consistent with previous analyses.

(1) All the programs are theory-based. "Social behavior theories are the basis of all but three programs, and eight are based on multiple theories. Social behavior theories assume that people strive to make rational choices about engaging in specific behaviors. These choices are tied to perceptions of the benefits—psychological, social, interpersonal, and health—associated with performing the behavior versus the costs. Thus, interventions attempt to modify participants' knowledge, attitudes, and behavior so that the perceived rewards of engaging in healthy behavior outweigh the perceived costs."

(2) Specific behavior goals are targeted. "The most effective programs have a few clearly delineated and articulated goals for behavior change. Sixteen programs highlight the negative consequences of the behavior being addressed. Eleven programs try to teaching youth to question counterproductive beliefs and replace them with attitudes consistent with preventive behavior."

(3) Skill-based components are central. "All selected programs use interactive student-to-student and student-to-instructor skill-building methods— including role-playing and rehearsal, guided practice, and immediate feedback—to address the target problem behavior. Eighteen programs try to improve verbal and nonverbal communication skills. Seventeen programs teach resistance skills and provide guided practice and behavioral modeling. Sixteen programs focus on the social influences that encourage behavior, including peers and the media. Thirteen programs teach general assertiveness skills. Eight programs, mostly those addressing substance use behaviors, teach skills to resist advertising appeals. Eight programs teach problem solving and decision-making skills."

(4) Written curriculum and trainer feedback are provided. "Most programs are based on a written curriculum presented by a trained instructor. In half of the programs, a teacher presents the curriculum after being trained. Other presenters include health educators or professionals, peer leaders, parents, and community members. The training process varies, but all but one use both written materials and practice."

(5) Substantial duration and intensity are necessary. "The most effective programs are generally more intensive in terms of the number of sessions and the length of intervention. Of the programs examined, 14 programs include over 10 hours of intervention and 2 have over 100 hours of intervention. Half of the programs take place over 10 sessions, and a few are taught over an entire school year or more."

(6) Multiple-component interventions are especially promising. "Many programs use a variety of techniques and delivery mechanisms. Most of the multiple-component programs have a classroom component and also involve the community and/or parents. Eight programs involve the community in some capacity, and seven programs involve parents. Several include a strong peer education or support component. About eight recruit either same-age or older-age peer leaders."

Reducing Risk-Taking Behavior through Economics and Laws

Outside of school, policy makers have tried to attack risk taking behavior by reducing opportunities for taking risks and enforcing potent consequences. This has been done through increasing economic costs for indulging in risk taking, increasing resources to aid in reducing risk taking, and law enforcement.

Economic strategies are seen in escalating the price of cigarettes and investing more resources to increase availability and facilitate access to contraceptives.

Examples of laws designed to reduce the amount of teen risk taking due to immature judgment and lack of skill are seen in the licensing of teen drivers. One set of laws call for licensing in stages – starting with a learner's permit and then moving on to a restricted or provisional license with a view to increasing driving experience before full licensure. Currently, such laws are in place in 41 States plus the District of Columbia. Another approach is to raise the age for licensure. Other licensing restrictions are designed to reduce distractions. These include limiting the number of passengers teens can transport and limiting nighttime driving. In addition, all 50 states have zero alcohol tolerance laws making it illegal for persons under the age of 21 to drive with any measurable amount of alcohol in their blood. Blood Alcohol Concentration laws for youth ranging from over .00 to .02 depending on the state. Other efforts related to enforcement involve greater action to crack down on sales of alcohol to minors.

Concerns About Current School Approaches

Despite some promising findings from programs such as those cited by Eisen and colleagues (2000), it is evident that current approaches involving schools are not *highly effective*, and for this and other reasons, they have not been replicated to scale in most school districts. One limitation of such programs is that they continue to focus on specific forms of teen risk-taking and on changing individuals. Also, the interventions generally do not reflect findings about (a) common motivational underpinnings, (b) the impact of enhancing school engagement, and (c) the need for comprehensive and multifaceted approaches for addressing school and student problems.

Interventions should be aimed at changing institutions rather than changing individuals.
Dryfoos 1990

Furthermore, implicit in the trend to focus on adolescence is the view that this developmental stage is when youth are more likely to take personal control over their choices and behaviors. Policies and practices based on such views tend to ignore early school experiences that contribute to or can help mediate against making bad choices. For example, Hawkins, et al (1999) found that "A package of interventions with teachers, parents, and children provided throughout the elementary grades can have enduring effects in reducing violent behavior, heavy drinking, and sexual intercourse by age 18 years among multiethnic urban children."

With respect to the emphasis on peer interactions, Steinberg (2003) suggests that it is a mistake to approach adolescent risk taking "as if it were an individual phenomenon when in reality it occurs in groups." Biglan & Cody (2003) stress that "A key pathway through which aggressive elementary school children become adolescents with multiple problems is their association with deviant peers. Patterson, et al (2000) report that over 50% of the variance in several risk behaviors is explained by involvement with deviant peers. Dishion, et al (2001) stress that "Early to middle adolescence is a critical period in which youth, in particular high-risk youth, are vulnerable to peer influences." These investigators report findings of "an iatrogenic effect associated with peer aggregation. ... It is noteworthy that the unplanned, incidental interactions among the youth were more powerful in shaping their future than those interactions engineered by the curriculum."

Based on their analyses of current approaches, Eisen and colleagues (2000) stress

> Most prevention experts now assume that there is an underlying problem behavior syndrome that contributes to adolescent risk-taking behaviors. Identifying the common elements associated with the most effective risk

prevention programs across content areas can help practitioners think about mechanisms that may work best in problem behavior prevention generally and, more specifically, about how to adapt these mechanisms for use in a variety of school and community settings that are or can become "prevention ready."

Finally, we note that, as we facilitate the work of the *National Initiative: New Directions for Student Support,* we hear widespread concern about "flavor of the month" initiatives coming and going in schools, districts, and states. While such practices usually are well-intentioned efforts to address problems such as harmful risk taking, the tendency is to target separately identified problems and add programs in an ad hoc and piece meal manner. And, it is commonplace for those staffing the various efforts to function in relative isolation of each other and other stakeholders. This all contributes to escalating program fragmentation, counterproductive competition, wasteful redundancy, and marginalization of the work, all of which compromises efforts to achieve cost-effectiveness.

Not Countering Harmful Risky Behavior Contributes to Other Costly Problems

There is a strong correlation between youth harmful risk taking and subsequent dropping out of school and later unemployment. Drawing on the Center for Disease Control and Prevention's Youth Risk Behavioral Assessment data, Dryfoos (1998) has stressed that dropouts appear to be involved with sex, drugs, and violence to a much greater degree than enrolled high school students." The National Center for School Engagement (no date) indicates that "For every race and gender group, high school dropouts claim more in government-funded social services expenditures than high school graduates. For men in particular, dropouts incur more in criminal justice costs." Vernez, Krop, and Rydell (1999) report that "Data from the 2000 census show that high school dropouts had only a 52% employment rate in 1999, compared to 71% for high school graduates, and 83% for college graduates."

Biglan and Cody (2003) caution that "Articulating the extent and cost of youth with multiple problems may prompt an already too punitive society to further punishment, but it can also be the occasion to point to the inadequate and harmful nature of current practices and to describe more effective interventions."

A sample of studies discussing the costs of youth risk taking behaviors can be accessed through the Center's online clearinghouse Quick Find on "Cost-Benefit Analyses Relevant to Addressing Barriers to Learning and Mental Health in Schools" at http://smhp.psych.ucla.edu/qf/costbenefitanalysis.htm

What Should Schools Do?

Because harmful risk taking behavior can have a negative impact on student and school success, schools want to and should play a role in preventing and reducing such behavior. However, in doing so, they need to overcome the limitations of prevailing policies and practices by moving in new directions.

A good jumping off place is to recall an early analysis by Joy Dryfoos (1990) in which she highlighted the following:

>High-risk behaviors are interrelated
>There is no one solution that can alter the outcomes for all children
>A package of components is required within each community
>Interventions should be aimed at changing institutions rather than changing individuals
>Timing of interventions is critical; most start too late to have any effect
>Continuity of effort must be maintained over time

Teens who engage in a risk behavior do not limit themselves to one behavior alone . . . [and] multiple-risk teens account for most of the risk-taking among adolescents.
Lindberg, Boggess, Porter, & Williams 2000

Going further, we suggest the importance of understanding that risk taking behaviors are interrelated because of commonalities in the way youngsters characteristics transact with the environments in which they are raised and function currently. As many researchers have emphasized, behavior, motivation, and mental health are influenced by the fit between the developmental stage of the adolescent and the characteristics of the social environment (e.g., Eccles, et al., 1993; McNeeley, et al., 2002). Such a reciprocal determinist understanding of cause leads to an appreciation that (1) some risk taking behavior is primarily instigated by environmental circumstances, (2) some is primarily instigated by factors within the individual, and (3) some stems from the contribution of both person and environmental factors.

Understanding causality in transactional terms has major implications for school policy and practice. One major implication is that efforts to address harmful risk taking must include widespread changes in schools and not just focus on students. And, in this respect, there is considerable emphasis on findings showing a significant relationship between the degree to which a student is *connected* with school and harmful risk taking. In turn, school connectedness is related to failure and disengagement from classroom learning. Conversely, enhanced connection to school is associated with engagement in learning, significant protective buffers, and optimism about the future. While cause and effect still must be established through controlled studies, few doubt that behavior problems will be reduced and a wide range of positive outcomes will emerge if students feel a positive connection to their school and are fully engaged in classroom learning (see Exhibit 3).

Exhibit 3

What Researchers Say about School Engagement

Porter and Lindberg (2000) indicate that "Students who report feeling connected to their school are less likely to be involved in behaviors that are detrimental to their health and strengthening these connections can be an important prevention strategy."

Ozer's (2005) review of findings from the National Longitudinal Study of Adolescent Health underscores that "adolescents who report feeling more connected to school show lower levels of emotional distress, risk behavior, and aggression." (Perceived school connection was operationalized in terms of happiness, belonging, safety, closeness, and fair treatment by teachers.)

McNeely, et al (2002) underscore the important role school can play through policies and practices that enhance connectedness and caring. They state: "When adolescents feel cared for by people at their school and feel like a part of their school, they are less likely to use substances, engage in violence, or initiate sexual activity at an early age.... When teachers are empathetic, consistent, encourage student self-management, and allow students to make decisions, the classroom management climate improves."

Fredricks, et al (2004) highlight that "engagement is associated with positive academic outcomes, including achievement and persistence in school; and it is higher in classrooms with supportive teachers and peers, challenging and authentic tasks opportunities for choice, and sufficient structure." See Appendix A for more on the synthesis of the research on engagement developed by Fredricks and her colleagues.

Bond, et al (2007) stress: "Along with connectedness to family, connectedness to school during adolescence has emerged as a key area for building protective factors for positive educational outcomes and lower rates of health-risk behaviors. School is particularly important as a social and learning environment, impacting not only on academic and vocational pathways, but also on present and future health and well being.

Young people who are not engaged with learning or who have poor relationships with peers and teachers are more likely to use drugs and engage in socially disruptive behaviors, report anxiety/depressive symptoms, have poorer adult relationships, and fail to complete secondary school. Therefore, the potential consequences for young people of becoming disconnected from school are far reaching.

Negative school experiences largely account for young people becoming alienated or disconnected from school. Research focusing on connectedness to school emphasizes the importance of the quality of relationships (peer and teacher) on engagement in learning, and on health and well being. Such experiences highlight different social experiences including, for example, being bullied, not getting along with teachers, feelings of not belonging, not doing well at school, and feeling under stress."

Overall, there is general agreement that engagement is related to higher achievement, and disengagement is a precursor of dropping out.

Moreover, from the perspective of intrinsic motivation research and theory (e.g., Brophy, 2004; Deci & Ryan, 1985, 2002; Fredricks, et al, & Paris, 2004; National Research Council, 2004; Stipek, 1998), interventions should be designed with particular attention to the impact on feelings of

- competence (e.g., "I can" do it – I can achieve; I can be successful)
- self-determination (e.g., "I want to" – The goals and processes are my choice; I have control over valued decisions)
- interpersonal relatedness (e.g., "I belong" – I am socially connected to significant others)

The point for emphasis here is that engaging and re-engaging students in learning at school involves interventions that are a good fit with student *motivation* as well as student capabilities. This involves simultaneously minimizing threats to and maximizing enhancement of feelings of competence, self-determination, and interpersonal connectedness.

Motivational factors play a significant role in risk taking

With respect to minimizing threats to positive motivation, it is particularly essential to plan the social control facets of schooling in ways that do not engender psychological reactance. In efforts to maintain social control and create safe environments, schools tend to overrely on negative consequences and control techniques. Such practices model behavior that can foster rather than counter development of negative values and often push students toward high risk behaviors. It is tempting to think that risk taking behavior can be exorcized by "laying down the law." However, for every student who "shapes up," too many others end up being pushed-out of school through reactive behaviors that lead to suspensions, "opportunity" transfers, and expulsions.

Thus, we suggest that a key step for future school improvement efforts is to rethink practices and policies that threaten feelings of competence, self-determination, and interpersonal connectedness and create psychological reactance. This means reworking policies and practices that overemphasize social control and that mandate extremely punitive responses for rule infractions.

Also of concern are policies and practices that can increase modeling and learning of harmful risk taking behaviors, such as can occur when students with problems are grouped together in programs that do not counter negative peer influences and "deviancy training."

We do recognize that there already has been a shift in many schools from punishment to positive behavior support in addressing unwanted behavior. However, we also recognize that as long as factors that lead to disengagement are left unchanged, it is likely that schools will perpetuate the phenomenon that William Ryan (1971) identified as *blaming the victim.* Social control strategies can temporarily suppress negative attitudes and behaviors, but re-engagement in classroom learning is not guaranteed. And, without re-engagement in classroom learning, unwanted behavior is very likely to reappear.

Along with minimizing practices that threaten students' feelings of competence, self-determination, and social connectedness, it is essential to maximize practices that can enhance such feelings. This involves going well beyond the narrow focus on school safety and security in establishing an environment that can significantly improve connectedness to school and engagement and re-engagement in classroom learning.

Students who report feeling connected to their school are less likely to be involved in behaviors that are detrimental . . . strengthening these connections can be an important prevention strategy.
Porter & Lindberg 2000

Relatedly, most policy analyses indicate that introducing separate programs for every specific problem, such as those identified as harmful risk taking behaviors, is untenable school policy. While any specific approach might be somewhat helpful, a few more problem-specific services or programs cannot equip most schools to make significant progress in ensuring that all youngsters have an equal opportunity to succeed at school.

Instead, the emphasis is shifting to policies for developing a comprehensive, multifaceted, and cohesive system of supports that addresses a wide range of barriers to learning and teaching and works with teachers to re-engage students who have become disengaged from classroom learning. From this perspective, we suggest the first consideration in planning ways to reduce harmful risk taking behavior is how well a practice or program contributes to developing a comprehensive support system.

As an aid for developing a comprehensive support system, recent policy and practice analyses provide guidance in the form of a unifying intervention framework (Center for Mental Health in Schools, 2005a, 2005b). As outlined below, the framework currently encompasses (1) a continuum of integrated intervention systems and (2) a multifaceted and cohesive set of content arenas. Such a framework provides a conceptual context for evaluating how well any proposed practice will fit with efforts to develop the overall system.

Continuum

Over time, the intent of a comprehensive approach to student/learning support is for schools to play a major role in establishing a full continuum of integrated intervention *systems*, including

- systems for promoting healthy development and preventing problems
- systems for intervening early to address problems as soon after onset as is feasible
- systems for assisting with chronic and severe problems.

While most schools have some programs and services that fit into one or more of these three levels of concern, the work is not coalesced into integrated systems. Moreover, the tendency to focus mostly on the most severe problems has skewed the process so that too little is done to prevent and intervene early after the onset of a problem. As a result, public education has been characterized as a system that "waits for failure."

The continuum of integrated systems spans the full spectrum of intervention efforts and envelops individuals, families, and the contexts in which they live, work, and play. It encompasses the principle of using the least restrictive and nonintrusive forms of intervention required in responding appropriately to problems and accommodating diversity. Also, the focus is on root causes and minimizing tendencies to develop separate programs for each observed problem. This enables coordination and integration of resources to increase impact and cost-effectiveness.

Content Arenas

In our work, we operationalize the continuum into a component to address barriers to learning and teaching (e.g., an enabling or learning supports component). Such a component helps to coalesce and enhance programs to ensure all students have an equal opportunity to succeed at school. Critical to this is defining what the entire school must do to enable *all* students to learn and *all* teachers to teach effectively. School-wide approaches are especially important where large numbers of students are affected and at any school that is not yet paying adequate attention to equity and diversity concerns.

Note that addressing barriers to learning involves both (1) helping students around barriers *and* (2) engaging/re-engaging them in classroom instruction. It should be evident that interventions that do not accomplish the second consideration generally are insufficient in sustaining student involvement, good behavior, and effective learning at school.

Pioneering efforts have designed the component to address barriers to learning and teaching into six programmatic arenas. In doing so, they have moved from a "laundry list" of programs, services, and activities to a defined content or "curriculum" framework that captures the essence of the multifaceted ways schools must address barriers to learning. Encompassed are programs to

1. *enhance regular classroom strategies to enable learning* (i.e., improving instruction for students who have become disengaged from learning at school and for those with mild-moderate learning and behavior problems)

2. *support transitions* (i.e., assisting students and families as they negotiate school and grade changes and many other transitions)

3. *increase home and school connections*

4. *respond to, and where feasible, prevent crises*

5. *increase community involvement and support* (outreach to develop greater community involvement and support, including enhanced use of volunteers)

6. *facilitate student and family access to effective services and special assistance as needed*.

Separate programs for every specific problem, such as those identified as harmful risk taking behaviors, is untenable school policy.

Combining the six content arenas with the continuum of integrated systems of intervention provides a comprehensive and multifaceted framework to guide and unify school improvement planning for developing a system of student/learning supports. The resultant matrix can be used in making decisions about how well any proposed practice fits (see Appendix B).

In the context of the entire intervention framework, the concept of *Response to Intervention* (as prominently featured in the 2004 reauthorization of the Individuals with Disabilities Education Act) provides an opportunity to improve the person-environment "fit." This should reduce failure, strengthen academic and social-emotional outcomes, and counter harmful risk taking behavior. Other initiatives designed to enhance prosocial behavior (e.g., service-learning programs) also should help to foster these effects, as well as increase connectedness and engagement.

Recommendations for School Policy and Planning

In sum, this school-focused analysis of harmful youth risk taking underscores the need for school improvement planning to rework policies and practices in keeping with an appreciation that some risk taking behavior is primarily instigated by environmental circumstances, some is primarily instigated by factors within the individual, and some stems from the contribution of both person and environmental factors. Moreover, research related to intrinsic motivation stresses the importance of designing interventions with particular attention to the impact on feelings of competence, self-determination, and interpersonal relatedness.

Based on these considerations, school improvement policy should focus simultaneously on

- minimizing practices that threaten students' feelings of competence, self-determination, and interpersonal connectedness. This includes reworking current approaches, especially those that engender psychological reactance and negative modeling and "deviancy training." Special attention needs to be paid to practices that
  - >overemphasize social control
  - >mandate of extremely punitive responses for rule infractions
  - >group students with problems together for extensive periods of time

- maximizing practices that enhance feelings of competence, self-determination, and interpersonal connectedness. This includes broadening current approaches to emphasize development of a comprehensive, multifaceted, and cohesive system of supports that
  - >addresses a wide range of barriers that interfere with school connectedness and active engagement in learning
  - >works with teachers to re-engage any students who have actively disengaged from classroom learning

With respect to developing a comprehensive, multifaceted, and cohesive system of supports, it is recommended that policy makers and school improvement planners adopt a unifying intervention framework that encompasses (1) a continuum of integrated intervention systems and (2) a multifaceted and cohesive set of content arenas.

Cited References and Other Resources

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The UCLA Center for Mental Health in Schools has a range of resources related to addressing psychosocial and mental health concerns and school improvement policies, planning, and implementation.
See http://smhp.psych.ucla.edu

Also see the information and resources specifically related to the National Initiative: New Directions for Student Support –
http://smhp.psych.ucla.edu/summit2002/ndannouncement.htm

APPENDIX A

ABOUT SCHOOL ENGAGEMENT AND RE-ENGAGEMENT
(http://www.smhp.psych.ucla.edu/pdfdocs/reengagestudents.pdf)

A growing research literature is addressing these matters. Below is an excerpt from a recent review which concludes: *Engagement is associated with positive academic outcomes, including achievement and persistence in school; and it is higher in classrooms with supportive teachers and peers, challenging and authentic tasks, opportunities for choice, and sufficient structure.*

***Engagement* is defined in three ways in the research literature**:

- *Behavioral engagement* draws on the idea of participation; it includes involvement in academic and social or extracurricular activities and is considered crucial for achieving positive academic outcomes and preventing dropping out.

- *Emotional engagement* encompasses positive and negative reactions to teachers, classmates, academics, and school and is presumed to create ties to an institution and influence willingness to do the work.

- *Cognitive engagement* draws on the idea of investment; it incorporates thoughtfulness and willingness to exert the effort necessary to comprehend complex ideas and master difficult skills.

A Key Outcome of Engagement is *Higher Achievement.* The evidence from a variety of studies is summarized to show that engagement positively influences achievement

A Key Outcome of Disengagement is Dropping Out. The evidence shows behavioral disengagement is a precursor of dropping out.

Antecedents of Engagement. Antecedents can be organized into:

- *School level factors*: voluntary choice, clear and consistent goals, small size, student participation in school policy and management, opportunities for staff and students to be involved in cooperative endeavors, and academic work that allows for the development of products

- *Classroom Context*: Teacher support, peers, classroom structure, autonomy support, task characteristics

- *Individual Needs*: Need for relatedness, need for autonomy, need for competence

Measurement of Engagement

- Behavioral Engagement: conduct, work involvement, participation, persistence, (e.g., completing homework, complying with school rules, absent/tardy, off-task)

- Emotional Engagement: self-report related to feelings of frustration, boredom, interest, anger, satisfaction; student-teacher relations; work orientation

- Cognitive Engagement: investment in learning, flexible problems solving, independent work styles, coping with perceived failure, preference for challenge and independent mastery, commitment to understanding the work

"School Engagement: Potential of the Concept, State of the Evidence" (2004) by J. Fredricks, P. Blumenfeld, & A. Paris. *Review of Educational Research, 74*, 59-109.

APPENDIX B

A School Improvement Tool for Moving toward a Comprehensive System of Learning Supports

Mapping & Analyzing Learning Supports

http://smhp.psych.ucla.edu/summit2002/tool%20mapping%20current%20status.pdf

The matrix on the following page provides a graphic organizer for reviewing school improvement plans and implementation to identify how well the efforts address barriers to learning and teaching – schoolwide and in the classroom. It can also be used to chart all current activities and resource use (e.g., involving school, community, district) as a basis for making status reports, doing a gap analysis, and setting priorities for moving forward.

Places that have plans to cover a considerable range of the interventions outlined by the matrix are considered to be developing a comprehensive a system of learning supports.

How the matrix has been used for initial mapping and priority setting:

Step 1. Reproduce an enlarged version of the attached matrix so there is room to enter all activity

Step 2. Enter all activity and resources (Note: some will go in more than one cell)

Step 3. Review the examples provided in the attached Exhibit and add anything that was forgotten.

Step 4. Identify which cells are well covered with *effective* interventions and which have only weak interventions or none at all

Step 5. Identify what needs to be done as the highest priorities to strengthen efforts to develop a comprehensive system of learning supports to address barriers to learning and teaching – schoolwide and in the classroom

Step 6. Revise school improvement plans in keeping with the mapping and analysis

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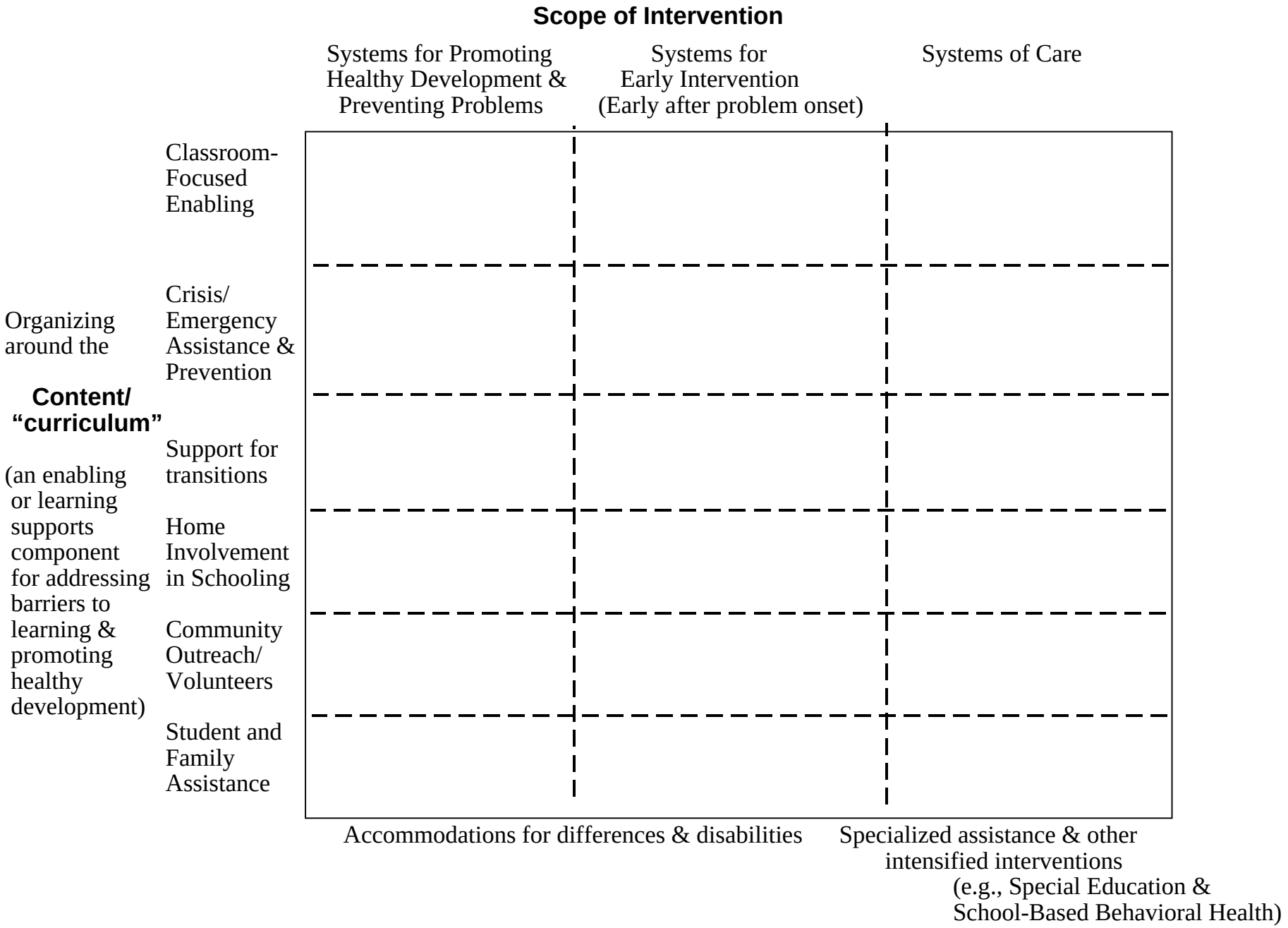
Support comes in part from the U.S. Department of Health and Human Services, Public Health Service, Health Resources and Services Administration, Maternal and Child Health Bureau, Office of Adol. Health.

Matrix for reviewing scope and content of a component to address barriers to learning.



*Embedded into the above content arenas are specific school-wide and classroom-based activities related to such concepts as social-emotional learning and initiatives such as positive behavior support, response to intervention, and CDC's Coordinated School Health Program.

Exhibit

"Content" Areas for a Component to Address Barriers to Learning

(1) Classroom-Based Approaches encompass

- Opening the classroom door to bring available supports in (e.g., peer tutors, volunteers, aids trained to work with students-in-need; resource teachers and student support staff work in the classroom as part of the teaching team)
- Redesigning classroom approaches to enhance teacher capability to prevent and handle problems and reduce need for out of class referrals (e.g. personalized instruction; special assistance as necessary; developing small group and independent learning options; reducing negative interactions and over-reliance on social control; expanding the range of curricular and instructional options and choices; systematic use of prereferral interventions)
- Enhancing and personalizing professional development (e.g., creating a Learning Community for teachers; ensuring opportunities to learn through co-teaching, team teaching, and mentoring; teaching intrinsic motivation concepts and their application to schooling)
- Curricular enrichment and adjunct programs (e.g., varied enrichment activities that are not tied to reinforcement schedules; visiting scholars from the community)
- Classroom and school-wide approaches used to create and maintain a caring and supportive climate

Emphasis at all times is on enhancing feelings of competence, self-determination, and relatedness to others at school and reducing threats to such feelings.

(2) Crisis Assistance and Prevention encompasses

- Ensuring immediate assistance in emergencies so students can resume learning
- Providing Follow up care as necessary (e.g., brief and longer-term monitoring)
- Forming a school-focused Crisis Team to formulate a response plan and take leadership for developing prevention programs
- Mobilizing staff, students, and families to anticipate response plans and recovery efforts
- Creating a caring and safe learning environment (e.g., developing systems to promote healthy development and prevent problems; bullying and harassment abatement programs)
- Working with neighborhood schools and community to integrate planning for response and prevention
- Capacity building to enhance crisis response and prevention (e.g., staff and stakeholder development, enhancing a caring and safe learning environment)

(3) Support for Transitions encompasses

- Welcoming & social support programs for newcomers (e.g., welcoming signs, materials, and initial receptions; peer buddy programs for students, families, staff, volunteers)
- Daily transition programs for (e.g., before school, breaks, lunch, afterschool)
- Articulation programs (e.g., grade to grade – new classrooms, new teachers; elementary to middle school; middle to high school; in and out of special education programs)
- Summer or intersession programs (e.g., catch-up, recreation, and enrichment programs)
- School-to-career/higher education (e.g., counseling, pathway, and mentor programs; Broad involvement of stakeholders in planning for transitions; students, staff, home, police, faith groups, recreation, business, higher education)
- Broad involvement of stakeholders in planning for transitions (e.g., students, staff, home, police, faith groups, recreation, business, higher education)
- Capacity building to enhance transition programs and activities

(cont.)

Exhibit (cont.) “Content” Areas for a Component to Address Barriers to Learning

(4) Home Involvement in Schooling encompasses

- Addressing specific support and learning needs of family (e.g., support services for those in the home to assist in addressing basic survival needs and obligations to the children; adult education classes to enhance literacy, job skills, English-as-a-second language, citizenship preparation)
- Improving mechanisms for communication and connecting school and home (e.g., opportunities at school for family networking and mutual support, learning, recreation, enrichment, and for family members to receive special assistance and to volunteer to help; phone calls and/or e-mail from teacher and other staff with good news; frequent and balanced conferences – student-led when feasible; outreach to attract hard-to-reach families – including student dropouts)
- Involving homes in student decision making (e.g., families prepared for involvement in program planning and problem-solving)
- Enhancing home support for learning and development (e.g., family literacy; family homework projects; family field trips)
- Recruiting families to strengthen school and community (e.g., volunteers to welcome and support new families and help in various capacities; families prepared for involvement in school governance)
- Capacity building to enhance home involvement

(5) *Community Outreach for Involvement and Support* encompasses

- Planning and Implementing Outreach to Recruit a Wide Range of Community Resources (e.g., public and private agencies; colleges and universities; local residents; artists and cultural institutions, businesses and professional organizations; service, volunteer, and faith-based organizations; community policy and decision makers)
- Systems to Recruit, Screen, Prepare, and Maintain Community Resource Involvement (e.g., mechanisms to orient and welcome, enhance the volunteer pool, maintain current involvements, enhance a sense of community)
- Reaching out to Students and Families Who Don't Come to School Regularly – Including Truants and Dropouts
- Connecting School and Community Efforts to Promote Child and Youth Development and a Sense of Community
- Capacity Building to Enhance Community Involvement and Support (e.g., policies and mechanisms to enhance and sustain school-community involvement, staff/stakeholder development on the value of community involvement, “social marketing”)

(6) Student and Family Assistance encompasses

- Providing extra support as soon as a need is recognized and doing so in the least disruptive ways (e.g., prereferral interventions in classrooms; problem solving conferences with parents; open access to school, district, and community support programs)
- Timely referral interventions for students & families with problems based on response to extra support (e.g., identification/screening processes, assessment, referrals, and follow-up – school-based, school-linked)
- Enhancing access to direct interventions for health, mental health, and economic assistance (e.g., school-based, school-linked, and community-based programs and services)
- Care monitoring, management, information sharing, and follow-up assessment to coordinate individual interventions and check whether referrals and services are adequate and effective
- Mechanisms for *resource* coordination and integration to avoid duplication, fill gaps, garner economies of scale, and enhance effectiveness (e.g., braiding resources from school-based and linked interveners, feeder pattern/family of schools, community-based programs; linking with community providers to fill gaps)
- Enhancing stakeholder awareness of programs and services
- Capacity building to enhance student and family assistance systems, programs, and services